PRESCRIPTION MONITORING PROGRAM
ADVISORY COMMITTEE
MINUTES

December 12, 2008
Kansas State Capitol Building
1st Floor, Room 143N
10th and Jackson
Topeka, KS

Friday, December 12, 2008

Committee Members Present: Karen Braman, R.Ph.,M.S., KS Board of Pharmacy (KBOP), Chair; Dr. Bob Twillman, KU Medical Center; Max Heidrick, R.Ph., Kansas Pharmacists Association (KPhA); Jeff Brandau, Kansas Bureau of Investigation (KBI); Dr. Joe Davison, Kansas Medical Society (KMS); Phil Schneider, Kansas Hospital Association; ; Harold Godwin, R.Ph., University of Kansas School of Medicine

Others in Attendance:
Berend Koops, Hein Law Firm; Bob Williams, KS Association of Osteopathic Medicine; Dan Morin, KMS; Susan Zalenski, Johnson & Johnson; Christina Morris, KBOP; Terry Bradstreet, Dillons Pharmacy; Deborah Stern, Kansas Hospital Association; Leslie Cnossen, Shawnee County Coroner's Office; Dr. Erik Mitchell, Shawnee County Coroner's Office; Mickie Brassel, Shawnee County District Attorney's Office; Jess Hoeme; Oren Peacock, CVS Caremark; JoAnne Gilstrap, KBOP; Ron Gaches, KIPSC; Nancy Kirk, KBOP; Mike Larkin, Kansas Pharmacists' Association; Chad Ullum, Walgreens; Harvey Smith, Virginia Prescription Drug Monitoring Law Enforcement Representative; Frank Whitchurch, KBOP; Mike Coast, KBOP; Nancy Kirk, KBOP

Committee Members Not Present: Dr. John Whitehead, Kansas Association of Osteopathic Medicine; Nicole Kehr, R.Ph., Kansas Pharmacists' Association; LeAnne Bell, Kansas Health Policy Authority; Dr. Robert Smith, Kansas Dental Association

MEETING CALLED TO ORDER: Karen Braman called the meeting to order at 10:00 a.m.

Introductions were made.

KBI REVIEW OF NATIONAL DATA- JEFF BRANDAU, KBI
Jeff Brandau, KBI gave a brief overview of national data related to prescription drug distribution nationally. According to Mr. Brandau, there is increased illicit use of prescription meds by teenagers and adult use and has become one of the KBI's top concerns.

SHAWNEE COUNTY CORONER'S OFFICE PRESENTATION- LESLIE CNOSSEN & DR. ERIK MITCHELL

The Shawnee County Coroner's Office gave a presentation on a toxicology database they have developed. In the database are logged autopsy results, specific drugs and blood levels of the drug at the time of autopsy, combinations of various drugs at the time of autopsy. The database also tracks the age, sex, race, and manner of death of a person in relation to the presence of a drug at the time of death. The Shawnee County Coroners Office reported the most prominent drugs abused in Kansas are Oxycodone and Methadone.

PRESENTATION ON VIRGINIA'S PRESCRIPTION DRUG MONITORING PROGRAM- HARVEY SMITH

Harvey Smith, the Virginia Law Enforcement Representative for the Virginia Board of Pharmacy's Prescription Drug Monitoring Program (PMP) Gave a presentation on Virginia's PMP

Virginia's PMP monitors drugs in Schedules II, III, and IV. Practitioners are not limited in their reporting but only these Scheduled drugs are required to be reported. The information gathered through the Prescription Drug Monitoring Program is available to doctors, pharmacists, law enforcement, and patients. Other authorized users can access the reports as well but the reports will not have the personal information the other referenced users may be able to obtain.

Mr. Smith informed the committee that Virginia uses their program as a risk management tool, built around protecting the patient and the practitioner. By allowing access to the reports that can be generated, practitioners can manage patient prescriptions and appropriately prescribe to patients. It is also a tool to make sure the patient is not doctor shopping, or that what they prescribe won't have ill effects with something another doctor has prescribed, and patients can see what they are getting and also check to make sure no one else is using their information. Another important goal of the Virginia Program is to provide pain management education to prescribers. Mr. Smith emphasized that the program is not intended to prevent patients from receiving their drugs for a legitimate medical purpose, not to decrease prescriptions for pain management, and not to target patients, prescribers, or pharmacies for investigations. Mr. Smith provided the Committee copies of Virginia's pain management pamphlet education program. Virginia works in collaboration with the Virginia medical association to provide pain management education to providers.

Mr. Smith concluded his presentation by talking about how Virginia's Prescription Drug Monitoring Committee is focusing on educating prescribers, dispensers and patients and trying to work on the interoperability between bordering states. He also addressed Virginia's funding and staffing needs. Virginia's original funding came from Harold Rogers grants but the Program recently received a very large portion of a state settlement from the Virginia Attorney General. Mr. Smith stated that in the future, if there was trouble with funding, they may consider using licensing fees to contribute to the Program.

LUNCH BREAK

REGULARLY SCHEDULED PMP ADVISORY COMMITTEE MEETING

REGULATION UPDATE

The Committee reviewed two letters regarding the draft PMP regulations, from Tomson George of Walgreens and Pete Stern, KIPSC. There were concerns about the Board of Pharmacy being able to add "drugs of concern" to the required reportable dispensed presciptions, and how it will be difficult to detemine what these "drugs of concern" should be. Max Heidrick suggested scheduling specific drugs that were of concern because it would then be required to be reported through the PMP program. Terry Bradstreet, Dillons, commented that the committee doesn't want to constantly add a "drug of the day." Susan Zalenski of Johnson & Johnson asked the committee to hold off on any decisions, as she had clients who would like to provide data as to other tracking programs for these drugs. Mike Coast stated that other states are using "drugs of concern" language and that pharmacies are accommodating this in all of those other sates. He suggested asking other states how this is being handledthere. The Committee agreed that this issue is something that should be addressedfurther.

Mr. Stern's letter addressed an issue of posting a sign stating the practitioner or pharmacist is participating in the PMP program. There were mixed views on this issue. Some thought that the sign had no value and others thought it was valuable, but think the sign may lose its effectiveness over time. Dr. Davison says that there will probably be pharmacists and physicians that don't like this type of requirement.

The Committee briefly discussed the concerns about requiring ASAP 2007 reporting standards. The committee agreed that Kansas should require the most recent reporting requirements out there, and not start with an older software version. Because it will be some time before the PMP program is up and running, ASAP 2007 standards had been citedin the regulations. A comparison of the various ASAP programs will be provided to Committee members. Christina Morris will send the draft regulations out to Committee members and interested parties for additional feedback. We will review them again at the next meeting.

DOSE PACK DISPENSING

Phil Schneider, KHA, updated the committee on previous discussions regarding the reporting requirements that emergency room Dose Pack Dispensing be reported to the Program. He informed the committee that KHA would be sending a survey out to all the hospitals regarding the dispensing of controlled substances from emergency rooms. The survey will ask questions regarding the availability of 24 hour pharmacies within a certain radius of the hospital, the frequency of dose pack dispensing from the emergency room, and so forth. Karen Braman suggested reporting back to the Committee by the next meeting if the data is gathered at that time.

LEGISLATIVE REPORT SUBCOMMITTEE

Karen Braman updated the Committee about the Legislative Report Subcommittee's progress. She outlined the upcoming deadlines for the Committee. The Legislative Report is due in January. The next Harold Rogers grant application is due mid-February.
ACTION ITEMS FOR NEXT MEETING: Karen Braman reviewed the action items to be completed before the next meeting. These include:
1) Scheduling of next PMP Advisory Committee meeting
2) Schedule meeting with Dana Droz
3) Contact other state PMPs about how they handle "Drugs of Concern"
4) Obtain feedback on draft rules and regulations from other stakeholders.
5) Review draft rules and regulations at next meeting
6) Review results of KHA survey at next meeting

Meeting adjourned.